

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>(Signature)</i>		8-2-01

BEST AVAILABLE COPY

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
—	(Through numeral)...	Canceled	Appeal
÷		Restricted	Objected

Claim	Date
Final	Original
1	7.26.01
2	✓
3	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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